		eni Faue I OLOI	
rmation to identify your	case:		
Anthony J. Lasto	vich		
First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name	
Bankruptcy Court for the:	DISTRICT OF MINNES	OTA	
19-50848			
	Anthony J. Lasto First Name First Name Bankruptcy Court for the:	Anthony J. Lastovich First Name Middle Name First Name Middle Name Bankruptcy Court for the: DISTRICT OF MINNESO	Anthony J. Lastovich First Name Middle Name Last Name First Name Middle Name Last Name Bankruptcy Court for the: DISTRICT OF MINNESOTA

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	750,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	825,500.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	1,575,500.00
Pai	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	756,183.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	2.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	317,542.2
	Your total liabilities	\$	1,073,727.21
Pai	t 3: Summarize Your Income and Expenses		
	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	18,149.0
		\$ \$	18,149.00 8,100.00
	Copy your combined monthly income from line 12 of Schedule I	\$ \$	·
aı aı	Copy your combined monthly income from line 12 of Schedule I	· 	8,100.0
	Copy your combined monthly income from line 12 of Schedule I	· 	8,100.0
i. 5.	Copy your combined monthly income from line 12 of Schedule I	ır other scl	8,100.0 hedules.

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Page 2 of 61 Case number (if known) 19-50848 Debtor 1 Anthony J. Lastovich

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$
		\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	2.00

	Cas	e 19-5064	8 000 6	_	cument	Page 3 of 61	.9 13.45	.17 De	SC I	viaiii
Fill	in this informa	tion to identify	your case and th							
Deb	otor 1	Anthony J.	Lastovich							
	_	First Name		Name		Last Name				
	otor 2 ouse, if filing)	First Name	Middle	Name		Last Name				
Uni	ted States Bank	ruptcy Court for	r the: DISTRICT	OF MIN	INESOTA					
Cas	se number 19	-50848							_	Charle if this is an
Cas	se number 13	-30046				_				Check if this is an amended filing
n ea	tit fits best. Be a	A/B: P parately list and cas complete and space is needed,	roperty describe items. List a accurate as possible	e. If two	married people	n asset fits in more than one e are filing together, both are e top of any additional pages	equally resp	onsible for su	the c	ng correct
			uilding, Land, or Ot	her Real	Estate You Ow	n or Have an Interest In				
		<u>-</u>				land, or similar property?				
	_	, ,	quitable interest in a	illy resid	erice, building,	iand, or similar property:				
	No. Go to Part 2									
	Yes. Where is the	ne property?								
1.1				What	is the property	? Check all that apply				
	7181 Ellen L				Single-family h	nome				r exemptions. Put
	Street address, if a	vailable, or other de	scription	Duplex or multi-unit building		ti-unit building			any secured claims on Schedule Have Claims Secured by Proper	
					Condominium	or cooperative				
					Manufactured	or mobile home			_	
	Side Lake	MN	55781-0000		Land		Current va entire prop			rent value of the tion you own?
	City	State	ZIP Code		Investment pro	pperty	\$70	00,000.00		\$350,000.00
					Timeshare Other					wnership interest
				_		in the property? Check one	a life estat	e), if known.	ancy	by the entireties, or
					Debtor 1 only		Fee sim	ole		
	Saint Louis				Debtor 2 only					
	County					•		if this is com	muni	ty property
				Othe		the debtors and another bu wish to add about this ite	`	structions)		
					erty identification		, sucii as 10	oui		
						ally described as: Lot 2	2, Block 1,	Sellars Be	ach,	Saint Louis
				Cou	inty, MN					

Official Form 106A/B Schedule A/B: Property page 1

Case 19-50848 Doc 6 Filed 11/05/19 Entered 11/05/19 13:45:17 Desc Main Page 4 of 61 Document Case number (if known) 19-50848 Debtor 1 Anthony J. Lastovich If you own or have more than one, list here: 1.2 What is the property? Check all that apply 3610 NW 46th Place Single-family home Do not deduct secured claims or exemptions. Put Street address, if available, or other description the amount of any secured claims on Schedule D: Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Condominium or cooperative ■ Manufactured or mobile home Current value of the Current value of the Cape Coral FL33993-0000 ■ Land entire property? portion you own? State ZIP Code Investment property \$500,000.00 \$250,000.00 П Timeshare Describe the nature of your ownership interest ☐ Other (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one ☐ Debtor 1 only Fee simple Lee ☐ Debtor 2 only County ☐ Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: Lots 23 and 24, Block 5477, Cape Coral Unit 90, according to the plat thereof recorded in Plat Book 24, Pages 12 - 29 inclusive, Lee County, FL If you own or have more than one, list here: 1.3 What is the property? Check all that apply 11254 Highway 37 ☐ Single-family home Do not deduct secured claims or exemptions. Put Street address, if available, or other description the amount of any secured claims on Schedule D: ■ Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Condominium or cooperative Manufactured or mobile home Current value of the Current value of the Hibbing MN 55746-0000 ☐ Land entire property? portion you own? State ZIP Code \$150,000.00 \$150,000.00 Investment property Timeshare Describe the nature of your ownership interest commercial building Other (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one land contract vendee Debtor 1 only Saint Louis ☐ Debtor 2 only

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....

\$750,000.00

Check if this is community property

(see instructions)

County

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

☐ Debtor 1 and Debtor 2 only

property identification number:

At least one of the debtors and another

Other information you wish to add about this item, such as local

See attached Exhibit A for legal description, Saint Louis County, MN

Official Form 106A/B Schedule A/B: Property page 2

Case 19-50848 Doc 6 Filed 11/05/19 Entered 11/05/19 13:45:17 Desc Main Page 5 of 61 Document Case number (if known) 19-50848 Debtor 1 Anthony J. Lastovich 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put **Ford** Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: F250 Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2012 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$25,000.00 \$25,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories □ No Yes Who has an interest in the property? Check one Make: Cruisers Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: 37 foot ■ Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Year: 2001 Debtor 2 only Current value of the Current value of the entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another ☐ Check if this is community property \$30,000.00 \$30,000.00 boat (see instructions) 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$55,000,00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... HHGs \$5,000.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe.....

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

☐ Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

■ No

page 3

	Case 19-50848	Doc 6	Filed 11/05/19	Entered 11/05/19 13:45:17	Desc Main
Debtor 1	Anthony J. Lastovich		Document	Page 6 of 61 Case number (if known)	19-50848
☐ Yes.	Describe				
■ No	ns oles: Pistols, rifles, shotguns Describe	, ammunition	, and related equipment		
□ No ·	s eles: Everyday clothes, furs, Describe	leather coats	s, designer wear, shoes,	accessories	
	wearing	apparel			\$500.00
■ No □ Yes. 13. Non-far Examp ■ No □ Yes. 14. Any oth ■ No □ Yes. 15. Add th for Pa	Describe rm animals bles: Dogs, cats, birds, horse Describe mer personal and househo Give specific information the dollar value of all of your 3. Write that number he	es Id items you ur entries fr	ı did not already list, in om Part 3, including an	ling rings, heirloom jewelry, watches, gems, g cluding any health aids you did not list by entries for pages you have attached	\$5,500.00
	scribe Your Financial Assets rn or have any legal or equ	uitable intere	est in any of the followi	ng?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No □ Yes 17. Deposi t Examp	ts of money les: Checking, savings, or o	ther financia		f deposit; shares in credit unions, brokerage hitution, list each.	
— 165					•
	17.1.	Checking	business	account at Frandson Bank	\$0.00
Examp ■ No □ Yes 19. Non-pu joint ve	ıblicly traded stock and in	t accounts wint stitution or is	th brokerage firms, mone suer name: corporated and uninco	ey market accounts rporated businesses, including an interes	t in an LLC, partnership, and
,		of entity:		% of ownership:	

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Case number (if known) 19-50848 Document

Debtor 1 Anthony J. Lastovich

	Northland Demolition and Recycling, In	c. 100	%	\$450,000.00
20.	Government and corporate bonds and other negotiable and non-negotia Negotiable instruments include personal checks, cashiers' checks, promisso Non-negotiable instruments are those you cannot transfer to someone by sign	ry notes, and money orders.		
	Yes. Give specific information about them Issuer name:			
21.	Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings acc ■ No	ounts, or other pension or profi	t-sharing pla	ns
	☐ Yes. List each account separately. Type of account: Institution name:			
22.	Security deposits and prepayments Your share of all unused deposits you have made so that you may continue Examples: Agreements with landlords, prepaid rent, public utilities (electric, goals).			, or others
	Yes Institution name	or individual:		
23.	Annuities (A contract for a periodic payment of money to you, either for life of No	r for a number of years)		
	Yes Issuer name and description.			
24.	Interests in an education IRA, in an account in a qualified ABLE program 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No	i, or under a qualified state to	aition progra	am.
	☐ Yes Institution name and description. Separately file the rec	ords of any interests.11 U.S.C.	§ 521(c):	
25.	Trusts, equitable or future interests in property (other than anything list ■ No □ Yes. Give specific information about them	ed in line 1), and rights or po	wers exerci	sable for your benefit
00	·	- manta		
∠0.	Patents, copyrights, trademarks, trade secrets, and other intellectual preserved internet domain names, websites, proceeds from royalties and license No			
	Yes. Give specific information about them			
27.	Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association hold No	ings, liquor licenses, professio	nal licenses	
	☐ Yes. Give specific information about them			
M	oney or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you ■ No			
	☐ Yes. Give specific information about them, including whether you already fi	ed the returns and the tax year	rs	
29.	Family support Examples: Past due or lump sum alimony, spousal support, child support, m No	aintenance, divorce settlement	, property set	itlement
	☐ Yes. Give specific information			

Official Form 106A/B Schedule A/B: Property page 5

		Case 19-5084	18 [Doc 6	Filed 11/05/19 Document	Entered 11/05/19 13:45:17 Page 8 of 61	Desc Main
Deb	tor 1	Anthony J. Lasto	vich		Document	Case number (if known)	19-50848
•	Examp No	amounts someone ow bles: Unpaid wages, dis benefits; unpaid lo Give specific informati	ability i	nsurance p		fits, sick pay, vacation pay, workers' compe	ensation, Social Security
		·					
_		ts in insurance policion in the second in th		surance; h	ealth savings account (H	ISA); credit, homeowner's, or renter's insura	nce
] Yes.	Name the insurance co		of each pony name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
•	If you a someo No		living tr		someone who has died t proceeds from a life ins	I urance policy, or are currently entitled to red	ceive property because
	Examp] No		ment di		rou have filed a lawsuit surance claims, or rights	or made a demand for payment to sue	
				possib		rom commercial building and Is and equipment against John unknown amount	\$50,000.00
35.	No Yes. Yes No	contingent and unlique Describe each claim ancial assets you did Give specific informati	l not alı		every nature, including	counterclaims of the debtor and rights t	o set off claims
36.						y entries for pages you have attached	\$500,000.00
Part	5: De:	scribe Any Business-Rel	lated Pro	operty You	Own or Have an Interest In	n. List any real estate in Part 1.	
	No. Go	to Part 6.	equitab	le interest i	n any business-related pro	operty?	
•	Yes. G	Go to line 38.					
							Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accou	nts receivable or com	missio	ns you alr	eady earned		
	No Yes.	Describe					
_	Examp I No	equipment, furnishing oles: Business-related of Describe			re, modems, printers, cop	oiers, fax machines, rugs, telephones, desk	s, chairs, electronic devices

	Case 19-50848	Doc 6	Filed 11/05/19		Desc Main
Debtor 1	Anthony J. Lastovich	า	Document	Page 9 of 61 Case number (if known)	19-50848
	nery, fixtures, equipment,	supplies yo	u use in business, and	tools of your trade	
□ No ■ Yes	Describe				
_ 100.	Dodonisc				
	Misc ed	quipment a	nd tools used in Ton	y's Construction business	\$265,000.00
41. Invent	ory				
■ No					
☐ Yes.	Describe				
42. Interes ■ No	sts in partnerships or joint	t ventures			
	Give specific information a	bout them			
	Nam	e of entity:		% of ownership:	
	mer lists, mailing lists, or	other compi	lations		
■ No.	lista in alcuda mana amalle ida			2.0.0.404/440.00	
⊔ во уо	ur lists include personally ide	entifiable infor	mation (as defined in 11 U.S	S.C. § 101(41A))?	
	■ No				
	☐ Yes. Describe				
44. Any b ı	usiness-related property y	ou did not a	Iready list		
■ No					
⊔ Yes.	Give specific information				
45 Add (the dellar value of all of va	our ontring f	rom Bort E including on	y entries for pages you have attached	
	art 5. Write that number he		,		\$265,000.00
	escribe Any Farm- and Commo			or Have an Interest In.	
46. Do yo ı	u own or have any legal or	r equitable ir	nterest in any farm- or c	ommercial fishing-related property?	
■ No.	Go to Part 7.				
☐ Yes	s. Go to line 47.				
Part 7:	Describe All Property You	Own or Have a	an Interest in That You Did	Not List Above	
	u have other property of an ples: Season tickets, country				
■ No					
1 I V 🗠 c	Give specific information				

Official Form 106A/B Schedule A/B: Property page 7

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

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Case number (if known) 19-50848 Document

Debtor 1 Anthony J. Lastovich

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$750,000.00
56.	Part 2: Total vehicles, line 5	\$55,000.00		
57.	Part 3: Total personal and household items, line 15	\$5,500.00		
58.	Part 4: Total financial assets, line 36	\$500,000.00		
59.	Part 5: Total business-related property, line 45	\$265,000.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$825,500.00	Copy personal property total	\$825,500.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$1,575,500.00

Official Form 106A/B Schedule A/B: Property page 8 Case 19-50848 Doc 6 Filed 11/05/19 Entered 11/05/19 13:45:17 Desc Main Document Page 11 of 61 1 2 9 b 2 4 b

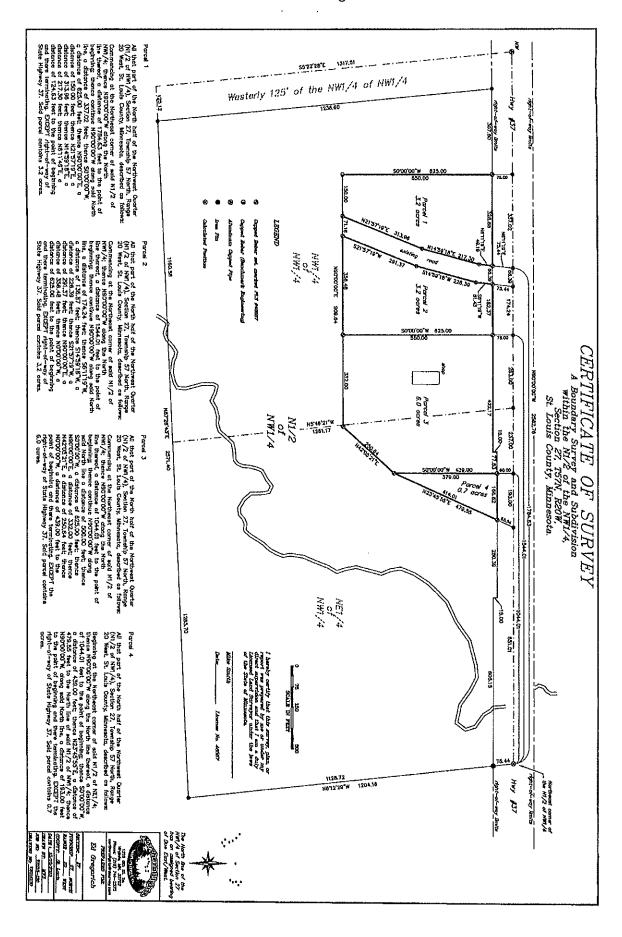
EXHIBIT A

All that part of the North half of the Northwest Quarter (N1/2 of NW1/4), Section 27, Township 57 North, Range 20 West, St. Louis County, Minnesota, described as follows:

Commencing at the Northeast corner of said N1/2 of NW1/4; thence N90°00'00"W along the North line thereof, a distance of 1044.01 feet to the point of beginning; thence continue N90°00'00"W along said North line a distance of 500.00 feet; thence S0°00'00"W, a distance of 625.00 feet; thence N90°00'00"E, a distance of 332.00 feet; thence N42°05'21"E, a distance of 250.64 feet; thence N0°00'00"W, a distance of 439.00 feet to the point of beginning and there terminating. EXCEPT the right-of-way of State Highway 37.

(shown as Parcel 3 on attached Survey)

141-0020-03640 OIV



Fill in this info	rmation to identify your	case:		
Debtor 1	Anthony J. Lasto	vich		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	DISTRICT OF MINNESOTA		
Case number	19-50848			
(if known)				☐ Check if this is an

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Homestead legally described as: Lot 2, Block 1, Sellars Beach, Saint Louis	\$350,000.00		\$347,100.00	Minn. Stat. §§ 510.01, 510.02
County, MN Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2012 Ford F250 Line from Schedule A/B: 3.1	\$25,000.00		\$4,800.00	Minn. Stat. § 550.37 subd. 12a
Line nom schedule Adb. 9.1			100% of fair market value, up to any applicable statutory limit	
HHGs Line from Schedule A/B: 6.1	\$5,000.00		\$5,000.00	Minn. Stat. § 550.37 subd. 4(a
Zino nom concedito 772.			100% of fair market value, up to any applicable statutory limit	
wearing apparel Line from Schedule A/B: 11.1	\$500.00		\$500.00	Minn. Stat. § 550.37 subd. 4(a
Ellie II oli odilodale 772. TTT			100% of fair market value, up to any applicable statutory limit	
Misc equipment and tools used in Tony's Construction business	\$265,000.00		\$12,000.00	Minn. Stat. § 550.37 subd. 6
Line from Schedule A/B: 40.1			100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Anthony J. Lastovich Page 14 01 01

Case number (if known) 19-50848

3.	Are you	claiming a	homestead	exemption o	f more	than \$170,350?
----	---------	------------	-----------	-------------	--------	-----------------

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

☐ Yes

Case	19-50646	Doc 6 Filed 11/05/19 Document	Page 15	nf 61	45.17 Desc iv	iaiii
Fill in this informati	on to identify you		1 444. 13	OF OI		
	Anthony J. Lasto	ovich Middle Name	Last Name			
Debtor 2	First Name	Middle Name	Last Name			
United States Bankru	iptcy Court for the:	DISTRICT OF MINNESOTA				
Case number 19-5 (if known)	50848				_	if this is an led filing
Official Form 1						
Schedule D:	Creditors	Who Have Claims :	Secured	by Property	y	12/15
s needed, copy the Adnumber (if known). Do any creditors hav	ditional Page, fill it o	f two married people are filing togethout, number the entries, and attach it to your property? sis form to the court with your other	to this form. On	the top of any addition	nal pages, write your na	
_	of the information b	•		J	•	
	ecured Claims	,				
2. List all secured clair for each claim. If more	ms. If a creditor has n than one creditor has	nore than one secured claim, list the cre a particular claim, list the other creditors al order according to the creditor's name	s in Part 2. As	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Cenlar Mortg		Describe the property that secures t	ho claim:	\$243,900.00	\$700,000.00	\$0.00
Attn: Bankru 425 Phillips I Ewing, NJ 08	ptcy 3Ivd	Homestead legally described 2, Block 1, Sellars Beach, Sa Louis County, MN As of the date you file, the claim is: apply. □ Contingent	d as: Lot aint			
Number, Street, City	, State & Zip Code	☐ Unliquidated				
Who owes the debt?	Check one.	Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only		An agreement you made (such as r car loan)	mortgage or secu	red		
Debtor 1 and Debtor		☐ Statutory lien (such as tax lien, med	chanic's lien)			
☐ At least one of the de☐ Check if this claim		Judgment lien from a lawsuit	Mortagae re	corded 11/25/15	10c #01274612	
LI CHECK II UIIS CIAIIII	relates to a	()thor (including a right to offect)	INDITUACE IC	COLUCU II/EJ/IJ (AUU かいししていし	

Opened 11/15 Last

Active 2/08/19 Date debt was incurred

community debt

Last 4 digits of account number

6274

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Debtor 1 Anthony J. Lastovich		Case number (if known) 19-50848				
First Name Middle N	lame Last Name					
2.2 Frandsen Bank	Describe the property that secures the claim:	\$15,000.00	\$50,000.00	\$0.00		
Creditor's Name	2005 Mack	1				
	2000 Maok					
	As of the date you file, the claim is: Check all that					
501 Chestnut St	As of the date you file, the claim is: Check all that apply.					
Virginia, MN 55792-2531	☐ Contingent					
Number, Street, City, State & Zip Code	☐ Unliquidated					
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.					
■ Debtor 1 only	An agreement you made (such as mortgage or	secured				
Debtor 2 only	car loan)					
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)					
At least one of the debtors and another	☐ Judgment lien from a lawsuit					
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset)					
Date debt was incurred	Last 4 digits of account number					
2.3 Irs	Describe the property that secures the claim:	\$44,000.00	\$700,000.00	\$0.00		
Creditor's Name	Homestead legally described as: Lot 2, Block 1, Sellars Beach, Saint					
PO Box 7346	Louis County, MN					
Philadelphia, PA	As of the date you file, the claim is: Check all that apply.					
19101-7346	☐ Contingent					
Number, Street, City, State & Zip Code	☐ Unliquidated					
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.					
Debtor 1 only	☐ An agreement you made (such as mortgage or	secured				
Debtor 2 only	car loan)					
Debtor 1 and Debtor 2 only	■ Statutory lien (such as tax lien, mechanic's lien)	1				
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit					
☐ Check if this claim relates to a		d 3/5/2018 doc #01328	731			
community debt	Other (including a right to offset)					
Date debt was incurred	Last 4 digits of account number					
2.4 John and Ellen Gregorich	Describe the property that secures the claim:	\$41,400.00	\$150,000.00	\$0.00		
Creditor's Name	See attached Exhibit A for legal description, Saint Louis County, MN					
2507 3rd Avenue W Hibbing, MN 55746	As of the date you file, the claim is: Check all that apply.	_				
	Contingent					
Number, Street, City, State & Zip Code	Unliquidated					
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.					
Debtor 1 only	An agreement you made (such as mortgage or	secured				
☐ Debtor 2 only	car loan)					
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien))				
At least one of the debtors and another	☐ Judgment lien from a lawsuit					
☐ Check if this claim relates to a community debt	Other (including a right to offset)	ntract vendor				
Date debt was incurred	Last 4 digits of account number					

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Deb	otor 1 Anthony J. Lastovich		Case number (if known)	19-50848	9-50848		
	First Name Middle N	lame Last Name					
2.5	Minnesota Dept Of Revenue	Describe the property that secures the claim:	\$65,000.00	\$700,000.00	\$0.00		
	Bankruptcy Stop 5700 PO Box 64447 Saint Paul, MN 55106	Homestead legally described as: Lot 2, Block 1, Sellars Beach, Saint Louis County, MN As of the date you file, the claim is: Check all that apply. Contingent					
Who	Number, Street, City, State & Zip Code Dowes the debt? Check one.	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.					
_	Debtor 1 only Debtor 2 only	☐ An agreement you made (such as mortgage or secar loan)	ecured				
	Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)					
	At least one of the debtors and another	☐ Judgment lien from a lawsuit					
	Check if this claim relates to a community debt	Other (including a right to offset) recorded	12/20/2017 doc #0132	24475			
Date	e debt was incurred	Last 4 digits of account number					
2.6	St Louis County - Auditor	Describe the property that secures the claim:	\$5,700.00	\$150,000.00	\$0.00		
	Creditor's Name	See attached Exhibit A for legal description, Saint Louis County, MN					
	100 N 5th Ave W Room 214 Duluth, MN 55802	As of the date you file, the claim is: Check all that apply. Contingent					
Wh	Number, Street, City, State & Zip Code o owes the debt? Check one.	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.					
	Debtor 1 only Debtor 2 only	☐ An agreement you made (such as mortgage or secar loan)	ecured				
	Debtor 1 and Debtor 2 only	■ Statutory lien (such as tax lien, mechanic's lien)					
	At least one of the debtors and another	☐ Judgment lien from a lawsuit					
	Check if this claim relates to a community debt	Other (including a right to offset)					
Date	e debt was incurred	Last 4 digits of account number 3641					

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Debtor 1 Anthony J. Lastovich		Case number (if known)	19-50848					
First Name Middle	Name Last Name							
Vanishing Point Ventures, LLC	Describe the property that secures the claim:	\$324,000.00	\$500,000.00	\$0.00				
Creditor's Name 3030 N Rocky Pointe	Lots 23 and 24, Block 5477, Cape Coral Unit 90, according to the plat thereof recorded in Plat Book 24, Pages 12 - 29 inclusive, Lee County, FL							
Drive Suite 150 Tampa, FL 33607	As of the date you file, the claim is: Check all that apply. Contingent	I						
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed							
Who owes the debt? Check one.	Nature of lien. Check all that apply.							
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured						
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)							
\square At least one of the debtors and another	☐ Judgment lien from a lawsuit							
☐ Check if this claim relates to a community debt	Other (including a right to offset) Land cor	ntract vendor						
Date debt was incurred	Last 4 digits of account number							
Wells Fargo Dealer Services	Describe the property that secures the claim:	\$17,183.00	\$25,000.00	\$0.00				
Creditor's Name	2012 Ford F250							
Attn: Bankruptcy Po Box 19657 Irvine, CA 92623	As of the date you file, the claim is: Check all that apply. Contingent							
Number, Street, City, State & Zip Code	☐ Unliquidated							
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.							
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or car loan)	secured						
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)							
Opened 03/15 Last Active Date debt was incurred 3/13/19	Last 4 digits of account number 7320	6						
Add the dollar value of your entries in	Column A on this page. Write that number here:	\$756,183	3.00					
If this is the last page of your form, ad Write that number here:	d the dollar value totals from all pages.	\$756,183	3.00					

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

C	ase 19-50040 L	Documen		t 1703/19 13.43. f 61	II Desc	iviaiii	
Fill in this info	rmation to identify your			V.			
Debtor 1	Anthony J. Lastov	vich					
	First Name	Middle Name	Last Name				
Debtor 2	First Name	Middle Name	Last Name				
(Spouse if, filing)	riistivallie						
United States E	Bankruptcy Court for the:	DISTRICT OF MINNESOT	ΓA				
Case number	19-50848						
(if known)					_	ck if this is	
					ame	ended filing	ļ
Official For	m 106E/F						
		ho Have Unsecur	ed Claims			12/	15
		e Part 1 for creditors with PRI		2 for creditors with NON	PRIORITY claims	. List the ot	her party to
Schedule D: Credeft. Attach the Coname and case n	litors Who Have Claims Sec	ired Leases (Official Form 106 ured by Property. If more space e. If you have no information of secured Claims	e is needed, copy the P	art you need, fill it out, r	number the entrie	s in the box	xes on the
	itors have priority unsecure						
☐ No. Go to	• •						
Yes.							
2. List all of you identify what possible, list	type of claim it is. If a claim ha the claims in alphabetical orde	s. If a creditor has more than one is both priority and nonpriority are according to the creditor's nan rticular claim, list the other credi	mounts, list that claim herene. If you have more than	e and show both priority a	nd nonpriority amo	ounts. As mu	ich as
(For an expla	anation of each type of claim, s	ee the instructions for this form	in the instruction booklet.)		B.C. O	N	
				Total claim	Priority amount	Nonpri amoun	
2.1 Irs		Last 4 digits of a	ccount number	\$1.00	\$1.0	00	\$0.00
,	Creditor's Name	When was the de	bt incurred?				
Philac	lelphia, PA 19101-7346						
	Street City State Zip Code	As of the date yo	u file, the claim is: Chec	k all that apply			
_	red the debt? Check one.	☐ Contingent					
■ Debtor	1 only	☐ Unliquidated					
☐ Debtor 2	2 only	☐ Disputed					
☐ Debtor	1 and Debtor 2 only		Y unsecured claim:				
☐ At least	one of the debtors and anothe	Pr ☐ Domestic suppr	ort obligations				
	f this claim is for a commur	<i>'</i> –	ain other debts you owe t	ū			
_	n subject to offset?	_	th or personal injury while	you were intoxicated			
■ No		☐ Other Specify					

☐ Yes

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Debt	or 1 Anthony J. Lastovich		Case number (if known)	19-50848	
2.2	Minnesota Dept Of Revenue	Last 4 digits of account number	\$1.00	\$1.0	\$0.00
	Priority Creditor's Name Bankruptcy Stop 5700 PO Box 64447	When was the debt incurred?			
	Saint Paul, MN 55106 Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent	onesit all that apply		
	■ Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:	:		
	☐ At least one of the debtors and another	☐ Domestic support obligations			
	☐ Check if this claim is for a community debt	Taxes and certain other debts you	owe the government		
	Is the claim subject to offset?	☐ Claims for death or personal injury	0		
	■ No	☐ Other. Specify	,		
	☐ Yes	Taxes			
u th	ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each cl nan one creditor holds a particular claim, list the other art 2.	aim. For each claim listed, identify what t	type of claim it is. Do not list cla	nims already includ aims fill out the Co	led in Part 1. If more
4.1	Amex	Last 4 digits of account number	0713		\$4,128.00
	Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998	When was the debt incurred?	Opened 03/16 Last / 5/03/19	Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
	_	Пол			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce th	at you did not	
	Is the claim subject to offset?	report as priority claims			
	No	☐ Debts to pension or profit-sharin	•	S	
	Yes	Other. Specify Credit Card	l		

Document Page 21 of 61 Debtor 1 Anthony J. Lastovich Case number (if known) 19-50848 \$19,601.00 4.2 Capital One Last 4 digits of account number 8431 Nonpriority Creditor's Name Attn: Bankruptcy Opened 03/14 Last Active Po Box 30285 When was the debt incurred? 1/09/18 Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.3 **Capital One** Last 4 digits of account number \$15,045.00 3557 Nonpriority Creditor's Name Attn: Bankruptcy Opened 05/14 Last Active Po Box 30285 When was the debt incurred? 12/28/17 Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.4 **Capital One** Last 4 digits of account number 2557 \$14,872.00 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? 69HI-CV-19-955 Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No
□ Yes

report as priority claims

■ Other. Specify judgment

lacktriangledown Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Debtor 1 Anthony J. Lastovich ase number (if known) 19-50848 4.5 Capital One Last 4 digits of account number 8735 \$11,116.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 03/14 Last Active Po Box 30285 When was the debt incurred? 4/28/18 Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.6 **David Schrunk et** Last 4 digits of account number \$12,309.46 Nonpriority Creditor's Name c/o McGrann Shea When was the debt incurred? 69du-cv-19-126 800 Nicolet Mall, Ste 2600 Minneapolis, MN 55402 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes judgment Other. Specify 4.7 Ess Brothers and Sons, Inc. Last 4 digits of account number \$3,000.00 Nonpriority Creditor's Name When was the debt incurred? 69du-cv-18-1457 9350 Cty Road 19 Loretto, MN 55357 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify judgment

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Debtor 1 Anthony J. Lastovich ase number (if known) 19-50848 \$28,097.90 4.8 Glen Johnson et al Last 4 digits of account number Nonpriority Creditor's Name c/o McGrann Shea When was the debt incurred? 18-cv-0421 800 Nicolet Mall, Ste 2600 Minneapolis, MN 55402 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify judgment ☐ Yes 4.9 **KTM Paving** Last 4 digits of account number \$7,000.00 Nonpriority Creditor's Name 5513 US Highway 2 When was the debt incurred? 69HI-co-19-179 **Duluth, MN 55810** Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify pending litigation ☐ Yes 4.1 Laurentian Aggregate, LLC \$62,639.50 Last 4 digits of account number 0 Nonpriority Creditor's Name 11038 Highway 37 When was the debt incurred? 69HI-cv-18-807 Hibbing, MN 55746 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify judgment

Document Page 24 of 61 Debtor 1 Anthony J. Lastovich Case number (if known) 19-50848 4.1 Louis Leustek & Sons, Inc. \$30,000.00 Last 4 digits of account number Nonpriority Creditor's Name 1715 E Sheridan St When was the debt incurred? 69HI-cv-18-698 Ely, MN 55731 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify judgment ☐ Yes 4.1 **North East Technical Services** \$8,305.55 Last 4 digits of account number Nonpriority Creditor's Name 526 Chestnut Street When was the debt incurred? 69HI-CV-18-751 Virginia, MN 55792 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify judgment 4.1 Retail Capital Partners, LLC \$34.022.56 Last 4 digits of account number Nonpriority Creditor's Name c/o Gurstel Law Firm When was the debt incurred? 69du-cv-19-1220 6681 Country Club Dr Golden Valley, MN 55427-4601 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

■ Other. Specify judgment

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Page 25 of 61 Document Debtor 1 Anthony J. Lastovich ase number (if known) 19-50848 4.1 \$51,566.39 Teamsters Local 346 Savings Last 4 digits of account number Nonpriority Creditor's Name 2002 London Road When was the debt incurred? 69du-cv-18-2917 Suite 300 **Duluth, MN 55812** Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify judgment ☐ Yes 4.1 Tim Mackey et al \$15,838.85 Last 4 digits of account number Nonpriority Creditor's Name c/o McGrann Shea When was the debt incurred? 69du-cv-19-127 800 Nicolet Mall, Ste 2600 Minneapolis, MN 55402 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify judgment ☐ Yes 4.1 Vonco VI Hibbing, LLC \$0.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 15301 140th Avenue When was the debt incurred? Becker, MN 55308 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

Part 3: List Others to Be Notified About a Debt That You Already Listed

 \square Obligations arising out of a separation agreement or divorce that you did not

lacksquare Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify guarantor of business debt

debt

■ No

☐ Yes

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Entered 11/05/19 13:45:17 Case 19-50848 Doc 6 Filed 11/05/19 Desc Main Document Page 26 of 61 ase number (if known) Debtor 1 Anthony J. Lastovich 19-50848 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Andrew, Bransky & Poole Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 302 W Superior St # 300 Part 2: Creditors with Nonpriority Unsecured Claims **Duluth, MN 55802** Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Colosimo Patchin Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Mitch Brunfelt ■ Part 2: Creditors with Nonpriority Unsecured Claims 301 Chestnut St Virginia, MN 55792 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Gregerson Rosow et al Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 100 Washington Ave S, Ste 1550 Part 2: Creditors with Nonpriority Unsecured Claims Minneapolis, MN 55401 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Gurstel Law Firm** Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 6681 Country Club Dr Part 2: Creditors with Nonpriority Unsecured Claims Golden Valley, MN 55427-4601 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Gurstel Law Firm** Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 6681 Country Club Dr ■ Part 2: Creditors with Nonpriority Unsecured Claims Golden Valley, MN 55427-4601 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Mcgrann Shea Anderson Et Al Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Christy E. Lawrey Part 2: Creditors with Nonpriority Unsecured Claims 800 Nicollet Mall Ste 2600 Minneapolis, MN 55402-2041 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Mcgrann Shea Anderson Et Al Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Amy Court** ■ Part 2: Creditors with Nonpriority Unsecured Claims 800 Nicollet Mall Ste 2600 Minneapolis, MN 55402-2041 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Mcgrann Shea Anderson Et Al Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Amy Court** Part 2: Creditors with Nonpriority Unsecured Claims 800 Nicollet Mall Ste 2600 Minneapolis, MN 55402-2041 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Wagner, Falconer & Judd, LTD. Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 80 S 8th St Ste 1700 Part 2: Creditors with Nonpriority Unsecured Claims Minneapolis, MN 55402-2214 Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 2.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00

_ . . _ .

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19-50848

Debtor 1 Anthony J. Lastovich

	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 2.00
Total	6f.	Student loans	6f.	\$ Total Claim 0.00
claims from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 317,542.21
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 317,542.21

		DOGUIIIEII	L FAUE ZO ULUI
Fill in this info	ormation to identify your	case:	
Debtor 1	Anthony J. Lasto	vich	
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	DISTRICT OF MINNESOT	ГА
Case number	19-50848		
(if known)			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have th r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					<u></u>
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.3	Oity		Otate	Zii Oode	
0	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5	- ity		Ciaio	211 0000	
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

		<u> Docume</u>	nt Page 29 of 61	
Fill in this in	formation to identify your	case:		
Debtor 1	Anthony J. Lasto	vich		
	First Name	Middle Name	Last Name	-
Debtor 2				_
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	DISTRICT OF MINNESO	DTA	_
Case number	19-50848			
(if known)				☐ Check if this is an
				amended filing
Official F	Form 106H			
		obtoro		
Scheau	le H: Your Cod	eptors		12/15
ill it out, and our name an	number the entries in the nd case number (if known)	boxes on the left. Attach . Answer every question.	lying correct information. If more space the Additional Page to this page. On the Additional Page to this page. On the Additional Page to this page.	
□ No				
Yes				
			operty state or territory? (Community preerto Rico, Texas, Washington, and Wiscon	
■ No. Go	o to line 3.			
☐ Yes. D	oid your spouse, former spou	use, or legal equivalent live	with you at the time?	
in line 2	again as a codebtor only i 6D), Schedule E/F (Official	f that person is a guarant	or or cosigner. Make sure you have lis	s filing with you. List the person shown ted the creditor on Schedule D (Official le D, Schedule E/F, or Schedule G to fill
	Jumn 1: Your codebtor ne, Number, Street, City, State and Z	P Code		ne creditor to whom you owe the debt nedules that apply:
3.1 No	rthland Demo & Recyc	•	□ Cabadula	D line
3.1 NO	itilialia Dellio & Recyc		☐ Schedule	e E/F, line 4.16
			□ Schedule	· · · · · · · · · · · · · · · · · · ·
				ibbing, LLC
-				
3.2 No	rthland Demo & Recyc			e D, line
				e E/F, line 4.12
			☐ Schedule	GServices
			North Fact	LOCURICAL SOLVICAS

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							-				
Fill	in this information to	o identify your ca	ase:								
Del	btor 1	Anthony J. I	_astovich			_					
	btor 2 buse, if filing)					_					
Uni	ited States Bankrup	tcy Court for the	: DISTRICT OF MINNE	SOTA							
Ca	se number 19-	50848					Check	if this is:			
(If kı	nown)			-			☐ An	amende	d filing		
										g postpetition ollowing date:	
<u>O</u>	fficial Form	<u> 1061</u>					\overline{MN}	1 / DD/ Y	YYY		
S	chedule I: `	Your Inc	ome								12/1
atta	rt 1: Describe	et to this form.	r spouse is not filing w On the top of any additi				I case num	nber (if k	known). A		
	information.									iiig spouse	
	If you have more than one job, attach a separate page with information about additional		Employment status	■ Employed□ Not employed				☐ Employed ☐ Not employed			
	employers.		Occupation	self							
	Include part-time, self-employed wo		Employer's name	Tony's Constru	ction						
	Occupation may in or homemaker, if		Employer's address	11254 Highway Hibbing, MN 55							
			How long employed t	here?				_			
Pai	rt 2: Give Det	tails About Mor	othly Income								
spoi	imate monthly incouse unless you are	ome as of the diseparated.	ate you file this form. If	, c		•		at persor	on the lin	·	Ū
2.			ry, and commissions (b calculate what the monthl		2.	\$		0.00	\$	N/A	
3.	Estimate and list	t monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross	Income. Add lir	ne 2 + line 3.		4.	\$	0	0.00	\$	N/A	

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Deb	tor 1	Anthony J. Lastovich	-	Case	e number (if kn	own)	19-50	1848		
				Fo	r Debtor 1			Debtor 2		
	Сор	y line 4 here	4.	\$	0	0.00	\$	filing sp	N/A	
5.		all payroll deductions:		-						
0.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$.00	\$		N/	Δ
	5b.	Mandatory contributions for retirement plans	5b.	\$_		0.00	\$		N/	
	5c.	Voluntary contributions for retirement plans	5c.	\$.00	\$		N/	
	5d.	Required repayments of retirement fund loans	5d.	\$	0	.00	\$		N/	
	5e.	Insurance	5e.	\$_		.00	\$		N/A	
	5f.	Domestic support obligations	5f.	\$_		0.00	\$		N/A	
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h.	\$_ + \$		0.00	\$ + \$		N/A	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	- 6.			0.00	. —		N/A	
			7.	Ψ – \$			Ψ \$			
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	Φ_	U	0.00	Φ		N/	<u>A</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0.0	¢	40.440		¢		NI/	•
	8b.	monthly net income. Interest and dividends	8a. 8b.		18,149	0.00	\$ \$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent	OD.	Ψ_		.00	Ψ		IN/A	<u> </u>
	00.	regularly receive Include alimony, spousal support, child support, maintenance, divorce	0	Φ.			c		N1 /	•
	8d.	settlement, and property settlement. Unemployment compensation	8c. 8d.	\$_ \$		0.00	\$ \$		N/A	
	8e.	Social Security	8e.	\$ -		0.00	\$—		N/	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$_		0.00	\$		N/A	
	8g.	Pension or retirement income	8g.	\$_		.00	\$		N/	
	8h.	Other monthly income. Specify:	_ 8h	+ \$_	0	.00	+ \$		N/	<u>A</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	18,149	0.00	\$		N	/A
10.	Calc	ulate monthly income. Add line 7 + line 9.	10. \$;	18,149.00	+ \$		N/A	= \$	18,149.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			,					
11.	Incluothe	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your r friends or relatives. iot include any amounts already included in lines 2-10 or amounts that are not a cify:	deper					chedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest is that amount on the Summary of Schedules and Statistical Summary of Certain lies						12.	\$	18,149.00
										hly income
13.		No.								
		Yes. Explain: DEBTOR'S INCOME FROM CONSTRUCTION BUS								

page 2

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United States Bankruptcy Court District of Minnesota

Case No.

19-50848

	Debtor(s)	Cha	pter 13		
BUSINESS INCO	ME AND EX	XPENSES	}		
FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS	(NOTE: ONLY INCL	UDE information	directly related	to the busines	s operation.)
PART A - GROSS BUSINESS INCOME FOR PREVIOUS 12 M	MONTHS:				
1. Gross Income For 12 Months Prior to Filing:		\$	482,000.	00	
PART B - ESTIMATED AVERAGE FUTURE GROSS MONTE	HLY INCOME:				
2 Gross Monthly Income				\$	41 000 00

PART B - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCO	ME:	<u> </u>	
2. Gross Monthly Income		\$	41,000.00
PART C - ESTIMATED FUTURE MONTHLY EXPENSES:			
3. Net Employee Payroll (Other Than Debtor)	\$	0.00	
4. Payroll Taxes		0.00	
5. Unemployment Taxes		0.00	
6. Worker's Compensation		0.00	
7. Other Taxes		56.00	
8. Inventory Purchases (Including raw materials)		10,400.00	
9. Purchase of Feed/Fertilizer/Seed/Spray		0.00	
10. Rent (Other than debtor's principal residence)		0.00	
11. Utilities		200.00	
12. Office Expenses and Supplies		450.00	
13. Repairs and Maintenance		380.00	
14. Vehicle Expenses		2,400.00	
15. Travel and Entertainment		0.00	
16. Equipment Rental and Leases		8,500.00	
17. Legal/Accounting/Other Professional Fees		0.00	
18. Insurance		465.00	
19. Employee Benefits (e.g., pension, medical, etc.)		0.00	
20. Payments to Be Made Directly By Debtor to Secured Creditors For Pre-Petition Bu	usiness Debts (Specify):		
DESCRIPTION	TOTAL		
21. Other (Specify):			
DESCRIPTION	TOTAL		
22. Total Monthly Expenses (Add items 3-21)		\$	22,851.00

PART D - ESTIMATED AVERAGE NET MONTHLY INCOME:

23. AVERAGE NET MONTHLY INCOME (Subtract item 22 from item 2)

In re

Anthony J. Lastovich

18,149.00

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Fill	in this informa	ation to identify yo	our case:			1		
Deb	tor 1	Anthony J. I	astovich	1		Che	eck if this is: An amended filing	
	tor 2 ouse, if filing)						A supplement sho	wing postpetition chapter f the following date:
Unit	ed States Bankı	ruptcy Court for the	: DISTRI	CT OF MINNESOTA			MM / DD / YYYY	
	e number 19	9-50848						
Of	fficial Fo	orm 106J						
		J: Your						12/1
info	ormation. If m		eded, atta	If two married people and chanother sheet to this formal.				
Par	t 1: Desci	ribe Your House	ehold					
••	■ No. Go to		in a separa	ate household?				
	□N	lo	·	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of De	btor 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state dependents							□ No □ Yes
								□ No □ Yes
								□ No
							_	_ □ Yes □ No
3.	Do your ex	oenses include	_	No				Yes
		f people other t d your depende	han $_{m au}$	Yes				
exp	imate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance it luded it on Schedule I: Y			Your exp	penses
4.				ses for your residence. In	nclude first mortgage	e 4.	\$	1,700.00
	. ,	nd any rent for th	o ground 0	1 101.				<u> </u>
		estate taxes				40	¢	0.00
		estate taxes erty, homeowner's	s, or renter	's insurance		4a. 4b.	·	0.00 0.00
		maintenance, reconnection		ipkeep expenses		4c. 4d.	·	150.00 0.00
5.				our residence, such as ho	me equity loans	4a. 5.	·	0.00

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ebtor 1 An	nthony J. Lastovich	Case num	ber (if known)	19-50848
Utilities:				
	ectricity, heat, natural gas	6a.	\$	400.00
	ater, sewer, garbage collection	6b.	\$	0.00
	lephone, cell phone, Internet, satellite, and cable services	6c.	\$	162.00
	ner. Specify:	6d.		0.00
	d housekeeping supplies	7.	·	450.00
	e and children's education costs	8.	\$	0.00
	, laundry, and dry cleaning	9.	*	100.00
•	l care products and services	10.	·	
	•		·	100.00
	and dental expenses	11.	\$	100.00
	rtation. Include gas, maintenance, bus or train fare.	12.	\$	200.00
	clude car payments.		·	
	nment, clubs, recreation, newspapers, magazines, and books	13.	·	150.00
	le contributions and religious donations	14.	\$	0.00
Insuranc				
	clude insurance deducted from your pay or included in lines 4 or 20.	45-	Φ.	0.00
	e insurance	15a.	·	0.00
	alth insurance	15b.	·	0.00
	hicle insurance	15c.		202.00
	ner insurance. Specify:	15d.	\$	0.00
	o not include taxes deducted from your pay or included in lines 4 or 20).		
Specify:		16.	\$	0.00
. Installme	ent or lease payments:			
17a. Ca	r payments for Vehicle 1	17a.	\$	700.00
17b. Ca	r payments for Vehicle 2	17b.	\$	0.00
17c. Oth	ner. Specify: payment on Mack truck paid by co-debtor			
	corneration	17c.	\$	1.00
17d. Oth	ner. Specify:	17d.	\$	0.00
	ments of alimony, maintenance, and support that you did not rep		<u> </u>	0.00
	d from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form		\$	0.00
	yments you make to support others who do not live with you.	1001).	\$	0.00
Specify:	yoo you make to cuppers outlook and us not mee main you.	19.		0.00
	al property expenses not included in lines 4 or 5 of this form or or		ur Income	
	ortgages on other property	20a.		2,500.00
	al estate taxes	20b.	·	585.00
		20c.	·	
	operty, homeowner's, or renter's insurance		·	0.00
	intenance, repair, and upkeep expenses	20d.		0.00
20e. Ho	meowner's association or condominium dues	20e.	\$	0.00
. Other: Sp	pecify: utilities and upkeep on FL property	21.	+\$	600.00
Calaulati				
	e your monthly expenses		Φ.	0.400.00
	lines 4 through 21.		\$	8,100.00
22b. Cop	y line 22 (monthly expenses for Debtor 2), if any, from Official Form 10	JbJ-2	\$	
22c. Add	line 22a and 22b. The result is your monthly expenses.		\$	8,100.00
Coloulati	a your monthly not income			
	e your monthly net income.	22-	¢.	40 440 00
	py line 12 (your combined monthly income) from Schedule I.	23a.		18,149.00
23b. Co	py your monthly expenses from line 22c above.	23b.	-\$	8,100.00
00 5				
	btract your monthly expenses from your monthly income.	220	\$	10,049.00
The	e result is your <i>monthly net income</i> .	23c.	Ψ	10,043.00
For examp	expect an increase or decrease in your expenses within the year a ple, do you expect to finish paying for your car loan within the year or do you expend to the terms of your mortgage?			ease or decrease because of
— 140.	Explain here:			
Yes.				

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Fill in this infor	mation to identify your	case:		
Debtor 1	Anthony J. Lasto	vich		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF MINNESO	DTA	
Case number	19-50848			
(if known)				Check if this is an amended filing
Official For	m 106Dec			•
		n Individual	Debtor's Schedules	12

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below								
Di	d you pay or agree to pay someone who is NOT an attorney to	help yo	u fill out bankruptcy forms?						
-	No								
	Yes. Name of person		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)						
tha	Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Anthony J. Lastovich X								
	Anthony J. Lastovich Signature of Debtor 1	S	gnature of Debtor 2						
	Date November 5, 2019	D	ate						

Official Form 106Dec

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		ation to identify you								
Deb	otor 1	Anthony J. Lasto	ovich Middle Name	Last Name						
	otor 2 use if, filing)	First Name	Middle Name	Last Name						
Unit	ted States Ban	kruptcy Court for the:	DISTRICT OF MINNESO	TA						
Cas (if kn		9-50848				heck if this is an mended filing				
Sta Be a info	s complete a	of Financial	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for sup v additional pages, write you					
		,	arital Status and Where You	Lived Before						
1.	What is your	current marital statu	ıs?							
	■ Married □ Not marr	ried								
2.	During the la	ring the last 3 years, have you lived anywhere other than where you live now?								
	■ No□ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.									
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
3. state					ity property state or territory co, Texas, Washington and W					
	■ No □ Yes. Mal	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	ficial Form 106H).						
Par	t 2 Explain	n the Sources of You	r Income							
4.	Fill in the total	l amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?				
	□ No ■ Yes. Fill	in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
		of current year until I for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$300,000.00	☐ Wages, commissions, bonuses, tips					
			Operating a business		☐ Operating a business					

Official Form 107

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					Debtor 1				Debtor 2		
						of income I that apply.		income e deductions and ions)	Sources of ince Check all that a		Gross income (before deductions and exclusions)
	r last cal inuary 1			31, 2018)	☐ Wage bonuses,	s, commissions, tips		\$482,752.00	☐ Wages, combonuses, tips	missions,	
					■ Opera	ating a business			☐ Operating a	ousiness	
5.	Include and othe winning	inco er p gs. If ch so	ome regard ublic bene you are fil	dless of whetled the payments; ing a joint canthe gross incomined.	her that inco pensions; i se and you	rental income; inter have income that y	amples of rest; divid you receiv	other income are a ends; money collected together, list it	alimony; child supp	royalties; and btor 1.	ecurity, unemployment, d gambling and lottery
					Debtor 1 Sources Describe	of income below.	each	s income from source e deductions and ions)	Debtor 2 Sources of inco Describe below.		Gross income (before deductions and exclusions)
	rt 3: L					ore You Filed for					
	■ No	es.	During the No. Yes * Subject	90 days before 30 day	a personal, ore you filed for you filed for you filed for your filed for your for you filed for your f	family, or househod for bankruptcy, did for bankruptcy, did to the whom you pain to an attorney for the anattorney for the anattorney for the anattorney for the primarily consumer for bankruptcy, did for bankruptcy, did for to whom you pain the who	d you pay d a total of his bankris after tha imer deb d you pay	e." y any creditor a total of \$6,825* or more mestic support obli uptcy case. at for cases filed or ts. y any creditor a total of \$600 or more an	al of \$6,825* or more in one or more pay gations, such as che or after the date of al of \$600 or more?	e? ments and thid support and adjustment.	
	Credite	or's	Name and	d Address		Dates of payme	ent	Total amount	Amount you still owe	Was this p	ayment for
7.	Insiders of which a busine alimony	s inc h yo ess /.	lude your i u are an of you operat	elatives; any ficer, directo	general pa r, person in proprietor. 1	rtners; relatives of control, or owner of	any gene of 20% or	ral partners; partners more of their votin	wed anyone who erships of which you	ı are a genei y managing	ral partner; corporations agent, including one for
	Inside	r's I	Name and	Address		Dates of payme	ent	Total amount	Amount you	Reason fo	r this payment

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Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost			ments or transfer an	y property on a	ccount of a d	ebt that benefited an	
	No						
	☐ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment ditor's name	
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures					
9.	Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes.						
	□ No						
	Yes. Fill in the details.						
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case	
	Tim Mackey vs TONY LASTOVICH,	CIVIL JUDGMENT ST LOUIS COUNTY			☐ Pending		
	TONYS CONSTRUCTION		DISTRICT 1 COL	JRT	☐ On appe	eal	
	69DUCV19127				Concluded		
	Teamsters Local 346 Savings And	CIVIL JUDGMENT	ST LOUIS COUN	ITY	☐ Pending	ļ	
	vs TONY LASTOVICH		DISTRICT 1 COL	JRT	☐ On appe	eal	
	69DUCV182917				Conclud	led	
	Louis Leustek & Sons, Inc. v Anthony J. Lastovich	money suit	St Louis County 320 W 2nd St		☐ Pending ☐ On appe		
			Suite 302 Duluth, MN 5580	2	Conclud	led	
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below ☐ No. Go to line 11. ☐ Yes. Fill in the information below.		erty repossessed, fo	reclosed, garnis	shed, attached	d, seized, or levied?	
	Creditor Name and Address	Describe the Property				Value of the	
		Explain what happened	i		pro		
	Ess Brothers and Sons, Inc. 9350 Cty Road 19	money		2/21/	2/21/19 \$2,		
	Loretto, MN 55357	☐ Property was reposse	essed.				
		☐ Property was foreclosed.					
		Property was garnished.					
		☐ Property was attached	d, seized or levied.				
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details.		luding a bank or fina	ncial institutior	ı, set off any a	amounts from your	
	Creditor Name and Address	Describe the action the	creditor took	Date	action was	Amount	
				taker	1		

Case 19-50848 Doc 6 Filed 11/05/19 Entered 11/05/19 13:45:17 Desc Main Document Page 39 of 61 Case number (if known) 19-50848 Debtor 1 Anthony J. Lastovich 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You John F Hedtke \$2,000.00 1217 E 1st St Duluth, MN 55805-2402 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details.

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 4

transferred

Description and value of any property

Person Who Was Paid

Address

Amount of

payment

Date payment

made

or transfer was

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Debtor 1 Anthony J. Lastovich

	transferred in the ordinary course of your but Include both outright transfers and transfers may include gifts and transfers that you have already No	de as security (such as the	ne granting of a s	ecurity inter	rest or mortgage on your	property). Do not					
	Yes. Fill in the details.										
	Person Who Received Transfer Address	Description and various property transferr		paymer	e any property or its received or debts exchange	Date transfer was made					
	Person's relationship to you			para in	cxondinge						
	3rd parties	sold two trucks trailers used in		\$113,4	00 total	in 2018					
	none										
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No										
	Yes. Fill in the details.										
	Name of trust	Description and v	alue of the prope	erty transfe	erred	Date Transfer was made					
Par	List of Certain Financial Accounts, Inst	truments, Safe Deposit	Boxes, and Stor	rage Units							
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc ■ No ■ Yes. Fill in the details.	r other financial accour	nts; certificates o	of deposit;							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accour instrument	1	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer					
21.	Do you now have, or did you have within 1 yeash, or other valuables?	ear before you filed for	bankruptcy, any	/ safe depo	sit box or other depos	tory for securities,					
	■ No □ Yes. Fill in the details.										
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, St State and ZIP Code)		Describe th	ne contents	Do you still have it?					
22.	Have you stored property in a storage unit or	r place other than your	home within 1 y	ear before	you filed for bankrupto	y?					
	■ No □ Yes. Fill in the details.										
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe th	ne contents	Do you still have it?					
Par	t 9: Identify Property You Hold or Control f	or Someone Else									
23.	Do you hold or control any property that son for someone.	neone else owns? Inclu	ide any property	you borro	wed from, are storing f	or, or hold in trust					
	■ No □ Yes. Fill in the details.										
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St		Describe th	ne property	Value					

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Anthony J. Lastovich Debtor 1

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions ap	ions apply	definition	the following	Part 10.	pose of	the pur	For
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- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used

	to o	wn, operate, or utilize it, including dispo	osal sites.							
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.									
Rep	ort a	II notices, releases, and proceedings th	at you know about, regardless of when	the	y occurred.					
24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?									
		No Yes. Fill in the details.								
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice				
25.	Hav	re you notified any governmental unit of	any release of hazardous material?							
		No Yes. Fill in the details.								
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice				
26.	Hav	ve you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.								
		No Yes. Fill in the details.								
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case				
Par	t 11:	Give Details About Your Business or	Connections to Any Business							
27.	Wit	hin 4 years before you filed for bankrupt	cy, did you own a business or have any	y of	the following connections to any	business?				
		☐ A sole proprietor or self-employed i	n a trade, profession, or other activity,	eithe	er full-time or part-time					
		☐ A member of a limited liability comp	any (LLC) or limited liability partnershi	p (L	LP)					
		☐ A partner in a partnership								
		☐ An officer, director, or managing executive of a corporation								
		☐ An owner of at least 5% of the votin	g or equity securities of a corporation							
		No. None of the above applies. Go to F	Part 12.							
		Yes. Check all that apply above and fill	in the details below for each business.							
	Bu	siness Name	Describe the nature of the business		Employer Identification number					
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security Dates business existed	number or ITIN.				
	То	ny's Construction	construction		EIN:					
			James Zahorsky		From-To ongoing					

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Debtor 1 Anthony J. Lastovich

	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business		r Identification number clude Social Security number or ITIN.
	(Number, Street, City, State and Zir Code)	Name of accountant or bookkeeper	Dates bus	siness existed
	Northland Demolition & Recycling, Inc.	demo dump	EIN:	81-2887924
		James Zahorsky	From-To	ongoing
	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	tcy, did you give a financial statement to a	nyone abou	t your business? Include all financial
	■ No			
	Yes. Fill in the details below.			
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		
Part	112: Sign Below			
are t	re read the answers on this <i>Statement of Fir</i> rue and correct. I understand that making a a bankruptcy case can result in fines up to .S.C. §§ 152, 1341, 1519, and 3571.	false statement, concealing property, or o	btaining mo	oney or property by fraud in connection
/s/ /	Anthony J. Lastovich			
Ant	thony J. Lastovich nature of Debtor 1	Signature of Debtor 2		
Date	November 5, 2019	Date		
Did y	you attach additional pages to Your Stateme	ent of Financial Affairs for Individuals Filin	g for Bankr	uptcy (Official Form 107)?
■ N	0		-	
□ Y	es			
Did v	you pay or agree to pay someone who is no	t an attorney to help you fill out hankrunte	v forms?	
■ N		- I I I I I I I I I I I I I I I I I I I	, . 5	
□ Y	es. Name of Person . Attach the <i>Bankru</i>	uptcy Petition Preparer's Notice, Declaration, a	and Signatur	e (Official Form 119).

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LOCAL FORM 1007-1 REVISED 06/16

United States Bankruptcy Court District of Minnesota

In re	Anthony J. Lastovich				Case No.	19-50848
		or(s)			Chapter	13
	DISCLOSURE OF COMPENSATION	OF	' <i>A</i>	ATTORNEY	FOR D	EBTOR
paid to	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 (s) and that compensation paid to me within one year beforme, for services rendered or to be rendered on behalf of aptcy case is as follows:	re th	ne	filing of the p	etition in	bankruptcy, or agreed to be
Prior	egal Services, I have agreed to accept to the filing of this statement I have received nce Due	\$ \$ \$		6,000.00 2,000.00 4,000.00		
	The source of the compensation paid to me was: ■ Debtor □ Other (specified)	y)				
	The source of the compensation to be paid to me is: Debtor Other (specified)	y)				
	I have not agreed to share the above-disclosed compensates of my law firm.	atior	n v	with any other	r person u	inless they are members and
associ	I have agreed to share the above-disclosed compensation ates of my law firm. A copy of the agreement, together with the mpensation, is attached.					
	In return for the above-disclosed fee, together with such ed by 11 U.S.C. §528(a)(1), I have agreed to render legal s					
	A. Analysis of the debtor's financial situation, and render setition in bankruptcy;	ring a	ad	vice to the de	ebtor in d	etermining whether to file a
F	3. Preparation and filing of any petition, schedules, stateme	ents (of	affairs and pl	an which	may be required;
	C. Representation of the debtor at the meeting of credito hereof;	rs an	ıd	confirmation	hearing,	and any adjourned hearings
Ι	D. Representation of the debtor in contested bankruptcy ma	atters	3;	and		

CERTIFICATION

6. Pursuant to Local Rules 1007-1 and 1007-3-1, I have advised the debtor of the requirements in the Statement of Financial Affairs to disclose all payments made, or property transferred, by or on behalf of the debtor to any person, including attorneys, for consultation concerning debt consolidation or reorganization, relief under bankruptcy law, or preparation of a petition in bankruptcy. I have reviewed the debtor's disclosures and they are accurate and complete to the

best of my knowledge.

E. Other services reasonably necessary to represent the debtor(s).

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LOCAL FORM 1007-1 REVISED 06/16

I certify that the foregoing, together with the written contract required by 11 U.S.C. §528(a)(1), is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy case.

Dated: November 5, 2019
Signature of Attorney
/s/ John F. Hedtke
John F. Hedtke 0167666

Fill in this inform	nation to identify your case:					
Debtor 1	Anthony J. Lastovich					
Debtor 2 (Spouse, if filing)						
United States Bankruptcy Court for the: District of Minnesota						
Case number (if known)	19-50848					

Check as directed in lines 17 and 21:						
According to the calculations required by this Statement:						
1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
☐ 3. The commitment period is 3 years.						
4. The commitment period is 5 years.						
☐ Check if this is an amended filing						

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 0.00 8,434.67 payroll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 50,000.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses Copy Net monthly income from a business. 50,000.00 here -> \$ 50.000.00 0.00 \$ profession, or farm 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions)

-\$

\$

0.00

0.00 Copy here -> \$

0.00

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

0.00

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				Column A Debtor 1		Column B Debtor 2 non-filing	or
7.	Interest, dividends, and royalties			\$	0.00	\$	0.00
	Unemployment compensation			\$	0.00	\$	0.00
	Do not enter the amount if you contend that the anthe Social Security Act. Instead, list it here:						
	For you	\$0	.00				
	For your spouse	\$.00				
	Pension or retirement income. Do not include an benefit under the Social Security Act. Also, except not include any compensation, pension, pay, annu United States Government in connection with a disdisability, or death of a member of the uniformed spay paid under chapter 61 of title 10, then include does not exceed the amount of retired pay to which fretired under any provision of title 10 other than of	as stated in the next sente ity, or allowance paid by the sability, combat-related inju- tervices. If you received an that pay only to the extent th you would otherwise be a	ence, do ne ury or ny retired that it	\$	0.00	\$	0.00
	Income from all other sources not listed above Do not include any benefits received under the Soreceived as a victim of a war crime, a crime agains domestic terrorism; or compensation, pension, pay United States Government in connection with a disdisability, or death of a member of the uniformed sources on a separate page and put the total below	cial Security Act; payments st humanity, or internationa ,, annuity, or allowance pa sability, combat-related inju- services. If necessary, list c	s al or id by the ury or				
				\$	0.00	\$	0.00
				\$	0.00	\$	0.00
	Total amounts from separate pages, if an	y.	+	\$	0.00	\$	0.00
							Total average
Part	2: Determine How to Measure Your Deduct	ions from Income					monthly income
12.	Copy your total average monthly income from I						
12. 13.	Copy your total average monthly income from l						monthly income
12. 13.	Copy your total average monthly income from I Calculate the marital adjustment. Check one: You are not married. Fill in 0 below.	line 11.					monthly income
12. 13.	Copy your total average monthly income from I Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with	n you. Fill in 0 below.					monthly income
12. 13.	Copy your total average monthly income from I Calculate the marital adjustment. Check one: You are not married. Fill in 0 below.	h you. Fill in 0 below. with you. 11, Column B, that was NC s tax liability or the spouse	DT regula 's suppor	rly paid for t t of someon	he house e other th	hold expense nan you or yo	\$ 58,434.67 es of you or your ur dependents.
12. 13.	Copy your total average monthly income from the Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with the amount of the income listed in line and the dependents, such as payment of the spouse's Below, specify the basis for excluding this income adjustments on a separate page. If this adjustment does not apply, enter 0 belower.	n you. Fill in 0 below. with you. 11, Column B, that was NCs tax liability or the spouse	DT regula 's suppor	rly paid for t t of someon voted to eac	he house e other th h purpose	hold expense nan you or yo	\$ 58,434.67 es of you or your ur dependents.
12. 13.	Copy your total average monthly income from the Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with the amount of the income listed in line of the dependents, such as payment of the spouse's Below, specify the basis for excluding this incadjustments on a separate page.	n you. Fill in 0 below. with you. 11, Column B, that was NCs tax liability or the spouse	DT regula 's suppor come dev	rly paid for t t of someon	he house e other th h purpose	hold expense nan you or yo	\$ 58,434.67 es of you or your ur dependents.
12. 13.	Copy your total average monthly income from the Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with the amount of the income listed in line and the dependents, such as payment of the spouse's Below, specify the basis for excluding this income adjustments on a separate page. If this adjustment does not apply, enter 0 belower.	n you. Fill in 0 below. with you. 11, Column B, that was NCs tax liability or the spouse	OT regula 's suppor come dev	rly paid for t t of someon voted to eac	he house e other th h purpose	hold expense nan you or yo	\$ 58,434.67 es of you or your ur dependents.
12. 13.	Copy your total average monthly income from the Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with the amount of the income listed in line and the dependents, such as payment of the spouse's Below, specify the basis for excluding this income adjustments on a separate page. If this adjustment does not apply, enter 0 belower.	n you. Fill in 0 below. with you. 11, Column B, that was NCs tax liability or the spouse	DT regula 's suppor come dev	rly paid for t t of someon voted to eac	he house e other th h purpose	hold expense nan you or yo	\$ 58,434.67 es of you or your ur dependents.
12. 13.	Copy your total average monthly income from the Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with the amount of the income listed in line and the dependents, such as payment of the spouse's Below, specify the basis for excluding this income adjustments on a separate page. If this adjustment does not apply, enter 0 belower.	n you. Fill in 0 below. with you. 11, Column B, that was NC s tax liability or the spouse come and the amount of income.	OT regula 's suppor come dev	rly paid for t t of someon voted to eac	he house e other th h purpose	hold expense nan you or yo	\$ 58,434.67 es of you or your ur dependents.
12.	Copy your total average monthly income from the Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filling with the amount of the income listed in line of the dependents, such as payment of the spouse's Below, specify the basis for excluding this income adjustments on a separate page. If this adjustment does not apply, enter 0 below separated - she pays nothing	n you. Fill in 0 below. with you. 11, Column B, that was NC s tax liability or the spouse come and the amount of incow.	OT regula 's suppor come dev	rly paid for t t of someon roted to eac 8,434.6	he house e other th h purpose	hold expense nan you or yo e. If necessar	\$ 58,434.67 es of you or your ur dependents. y, list additional
12. 13.	Copy your total average monthly income from It Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with You are married and your spouse is not filing Fill in the amount of the income listed in line 1 dependents, such as payment of the spouse's Below, specify the basis for excluding this incadjustments on a separate page. If this adjustment does not apply, enter 0 belowed the separated - she pays nothing	h you. Fill in 0 below. with you. 11, Column B, that was NC is tax liability or the spouse come and the amount of income.	OT regula 's suppor come dev	rly paid for t t of someon roted to eac 8,434.6	he house e other th h purpose	hold expense nan you or yo e. If necessar	s of you or your ur dependents. y, list additional - 8,434.67
12. 13.	Copy your total average monthly income from the Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with the amount of the income listed in line of dependents, such as payment of the spouse's Below, specify the basis for excluding this income adjustments on a separate page. If this adjustment does not apply, enter 0 belowed as the pays nothing. Total Your current monthly income. Subtract line 13. Calculate your current monthly income for the calculate and the pays the pays nothing.	h you. Fill in 0 below. with you. 11, Column B, that was NC is tax liability or the spouse come and the amount of income.	oT regula 's suppor come dev	rly paid for t t of someon roted to each 8,434.6	he house the other the h purpose	shold expense nan you or yo e. If necessar opy here=>	s of you or your ur dependents. y, list additional - 8,434.67
12. 13.	Copy your total average monthly income from the Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with the amount of the income listed in line of dependents, such as payment of the spouse's Below, specify the basis for excluding this income adjustments on a separate page. If this adjustment does not apply, enter 0 belowed as the pays nothing. Total Your current monthly income. Subtract line 13. Calculate your current monthly income for the calculate and the pays the pays nothing.	h you. Fill in 0 below. with you. 11, Column B, that was NC is tax liability or the spouse come and the amount of income. B from line 12.	oT regula 's suppor come dev	rly paid for t t of someon roted to each 8,434.6	he house the other the h purpose	shold expense nan you or yo e. If necessar opy here=>	\$ 58,434.67 Set of you or your ur dependents. y, list additional \$ 50,000.00 \$ 50,000.00
12. 13.	Copy your total average monthly income from the Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with the amount of the income listed in line of the dependents, such as payment of the spouse's Below, specify the basis for excluding this income adjustments on a separate page. If this adjustment does not apply, enter 0 below separated - she pays nothing Total Your current monthly income. Subtract line 13 Calculate your current monthly income for the 15a. Copy line 14 here=>	h you. Fill in 0 below. with you. 11, Column B, that was NC is tax liability or the spouse come and the amount of income. B from line 12.	oT regula 's suppor come dev	rly paid for t t of someon roted to each 8,434.6	he house the other the h purpose	shold expense nan you or yo e. If necessar opy here=>	s of you or your ur dependents. y, list additional 8,434.67 50,000.00

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Debtor 1 Anthony J. Lastovich Case number (if known) 19-50848

16	. Calculate the median family income that applies to y	ou. Follow these steps:		
	16a. Fill in the state in which you live.	MN		
	16b. Fill in the number of people in your household.	2		
	16c. Fill in the median family income for your state and s	ize of household.		_{\$} 76,398.00
	To find a list of applicable median income amounts instructions for this form. This list may also be avail			
17	How do the lines compare?			
	17a. Line 15b is less than or equal to line 16c. O 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N			
	17b. Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 at	lation of Your Disposable In		
Par	Calculate Your Commitment Period Under 11 U	J.S.C. § 1325(b)(4)		
18.	Copy your total average monthly income from line 1	١.		\$ 58,434.67
19.	contend that calculating the commitment period under 1° spouse's income, copy the amount from line 13.	married, your spouse is not fili U.S.C. § 1325(b)(4) allows yo	ing with you, and you ou to deduct part of your	0.424.67
	19a. If the marital adjustment does not apply, fill in 0 on	ine 19a.		-\$8,434.67
	19b. Subtract line 19a from line 18.			\$50,000.00
20.	Calculate your current monthly income for the year.	Follow these steps:		
	20a. Copy line 19b			\$50,000.00
	Multiply by 12 (the number of months in a year).			x 12
	20b. The result is your current monthly income for the year	ear for this part of the form		\$600,000.00
	20c. Copy the median family income for your state and s	ize of household from line 16	0	\$ 76,398.00
	21. How do the lines compare?			
	☐ Line 20b is less than line 20c. Unless otherwis	a ardarad by the court, on the	top of page 1 of this form, check	hov 2. The commitment
	period is 3 years. Go to Part 4.	e ordered by the court, on the	top of page 1 of this form, check	box 5, The communicine
	■ Line 20b is more than or equal to line 20c. Uncommitment period is 5 years. Go to Part 4.	ess otherwise ordered by the	court, on the top of page 1 of this	form, check box 4, The
Par	t 4: Sign Below			
	By signing here, under penalty of perjury I declare that the	ne information on this statemen	nt and in any attachments is true	and correct.
)	(/s/ Anthony J. Lastovich			
	Anthony J. Lastovich Signature of Debtor 1			
	Date November 5, 2019			
	MM / DD / YYYY			
	If you checked 17a, do NOT fill out or file Form 122C-2.			
	If you checked 17b, fill out Form 122C-2 and file it with the	nis form. On line 39 of that forr	m, copy your current monthly inco	me from line 14 above.

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Fill in this inf	formation to identify your case:		
Debtor 1	Anthony J. Lastovich	_	
Debtor 2			
(Spouse, if filir	ng)	-	
United States	Bankruptcy Court for the: District of Minnesota	-	
Case number (if known)	_19-50848	☐ Check if this is a	an amended filing
Official Form Chapter	122C-2 13 Calculation of Your Disposable	Income	04/1
	form, you will need your completed copy of <i>Chapter 13 State</i> Period (Official Form 122C-1).	ment of Your Current Monthly Income a	nd Calculation of
space is need	te and accurate as possible. If two married people are filing to ed, attach a separate sheet to this form, Include the line numb ges, write your name and case number (if known).		
Part 1: Ca	alculate Your Deductions from Your Income		
the questic	al Revenue Service (IRS) issues National and Local Standards ons in lines 6-15. To find the IRS standards, go online using th n may also be available at the bankruptcy clerk's office.		
expenses if	expense amounts set out in lines 6-15 regardless of your actual extense they are higher than the standards. Do not include any operating and do not deduct any amounts that you subtracted from your spous	expenses that you subtracted from income	•
If your expe	enses differ from month to month, enter the average expense.		
Note: Line r	numbers 1-4 are not used in this form. These numbers apply to info	ormation required by a similar form used in	chapter 7 cases.
5. The nu	umber of people used in determining your deductions from in	come	
plus th	the number of people who could be claimed as exemptions on you ne number of any additional dependents whom you support. This n mber of people in your household.		2
National St	tandards You must use the IRS National Standards to an	nswer the questions in lines 6-7.	
	clothing, and other items: Using the number of people you ente ards, fill in the dollar amount for food, clothing, and other items.	red in line 5 and the IRS National	\$ 1,288.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

Official Form 122C-2

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Anthony J. Lastovich 19-50848 Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 2 7c. Subtotal. Multiply line 7a by line 7b. 110.00 Copy here=> 110.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 114 7e. Number of people who are 65 or older 0 7f. Subtotal. Multiply line 7d by line 7e. 0.00 0.00 Copy here=> 7g. Total. Add line 7c and line 7f 110.00 Copy total here=> \$ 110.00 Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 566.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 915.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment -NONE-\$ Сору Repeat this amount 0.00 0.00 9b. Total average monthly payment \$ here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 915.00 915.00 or rent expense). If this number is less than \$0, enter \$0. here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and

Explain why:

affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

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Anthony J. Lastovich 19-50848 Debtor 1 Case number (if known) 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. □ 0. Go to line 14. ☐ 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 382.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 **Describe Vehicle 1:** 13a. Ownership or leasing costs using IRS Local Standard..... 0.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Average monthly Name of each creditor for Vehicle 1 payment -NONE-Repeat this Copy amount on line 33b. **Total Average Monthly Payment** 0.00 0.00 here => Copy net 13c. Net Vehicle 1 ownership or lease expense Vehicle 1 Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. expense here 0.00 0.00 Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard..... 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment -NONE-Сору Repeat this here amount on line Total average monthly payment 0.00 0.00 13f. Net Vehicle 2 ownership or lease expense Copy net Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. expense here 0.00 0.00 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 0.00 Public Transportation expense allowance regardless of whether you use public transportation. 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may

also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may

0.00

not claim more than the IRS Local Standard for Public Transportation.

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Debtor 1 Anthony J. Lastovich Case number (if known) 19-50848

Oth	er Necessary		addition to the expense following IRS categori		ions listed above	, you are allowed your monthly expenses	for	
16.	self-employm your pay for the and subtract t	ent taxes, social s hese taxes. Howe	security taxes, and Medever, if you expect to re the total monthly amou	dicare ta ceive a	ixes. You may inc tax refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from just divide the expected refund by 12 for taxes.	\$	875.33
17.		•	•	duction	s that your job red	quires, such as retirement		
	contributions,	union dues, and	uniform costs.		, ,	•	•	0.00
	Do not include	e amounts that ar	e not required by your	job, suc	h as voluntary 40	1(k) contributions or payroll savings.	\$	0.00
18.	filing together Do not include	, include paymen	ts that you make for yo e insurance on your de	ur spou	se's term life insu	e insurance. If two married people are rance. spouse's life insurance, or for any form	\$	0.00
19.						by the order of a court or		
			spousal or child suppo ast due obligations for s			You will list these obligations in line 35.	\$	0.00
20.			amount that you pay fo	•		· ·		
		tion for your job,	, , ,					
	_			ent child	if no public educ	ation is available for similar services.	\$	0.00
21		•			•	sitting, daycare, nursery, and preschool.	· —	
۷1.			ny elementary or secon			sitting, daycare, nursery, and prescribor.	\$	0.00
22.	that is require	d for the health a		ur depe	ndents and that is	amount that you pay for health care s not reimbursed by insurance or paid al entered in line 7.		
	Payments for	health insurance	or health savings acco	unts sh	ould be listed only	y in line 25.	\$	0.00
23.	23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted. +\$					0.00		
24.	Add all of the Add lines 6 th	e expenses allow	ved under the IRS exp	ense a	llowances.		\$	4,136.33
Add		se Deductions	These are additional	deduct	ions allowed by th	ne Means Test.		
	μ.		Note: Do not include					
25.		sability insurance,				ses. The monthly expenses for health ly necessary for yourself, your spouse, o	r	
	Health insura	nce		\$	604.00			
	Disability insu	ırance		\$	0.00			
	Health saving	s account		+ \$ _	0.00			
	Total			\$_	604.00	Copy total here=>	\$	604.00
	Do you actua	lly spend this tota	I amount?			_		
	_ `	ow much do you						
	Yes	·		\$				
26.	continue to pa	ay for the reasona old or member of y	able and necessary car	e and su vho is u	upport of an elder nable to pay for s	e actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may 29A(b)	\$	0.00
27.						nses that you incur to maintain the es Act or other federal laws that apply.		
			e nature of these exper			oo, tot of other reactal laws that apply.	\$	0.00

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ebtor 1	Anthony J. Lastovich		Case number (if kn	nown)	19-5	0848		
	Additional home energy costs. Your hom line 8.	ne energy costs are included in your insur-	ance and opera	ting	expens	es on		
	If you believe that you have home energy of 8, then fill in the excess amount of home en		costs included	in ex	penses	on line)	
	You must give your case trustee document amount claimed is reasonable and necessary		ust show that th	ne ad	ditional		\$	0.0
	Education expenses for dependent child \$170.83* per child) that you pay for your depublic elementary or secondary school.							
	You must give your case trustee document claimed is reasonable and necessary and r		ust explain why	the	amount			
	* Subject to adjustment on 4/01/22, and ev	ery 3 years after that for cases begun on	or after the date	of a	djustme	ent.	\$	0.0
30.	Additional food and clothing expense. Thigher than the combined food and clothing than 5% of the food and clothing allowance	he monthly amount by which your actual gallowances in the IRS National Standard	food and clothin	ıg ex	penses	are		
	To find a chart showing the maximum addinstructions for this form. This chart may also			sepa	rate			
	You must show that the additional amount	claimed is reasonable and necessary.					\$	0.0
	Continuing charitable contributions. The instruments to a religious or charitable organizations.		ite in the form o	f cas	h or fina	ancial		
	Do not include any amount more than 15%	of your gross monthly income.					\$	0.0
	Add all of the additional expense deduc Add lines 25 through 31.	tions.					\$_	604.00
Dedu	uctions for Debt Payment							
	or debts that are secured by an interest pans, and other secured debt, fill in lines		me mortgages	, vel	nicle			
	o calculate the total average monthly paym reditor in the 60 months after you file for ba		y due to each so	ecure	∋d			
	Mortgages on your home							age monthly
33a.	Copy line 9b here					=>	payn \$	0.00
004.	Loans on your first two vehicles						*	0.00
33b.	•						Ф	0.00
						=>	Ψ	0.00
33c.	Copy line 13e here					=>	\$	0.00
33d.	List other secured debts:							
Name	e of each creditor for other secured debt	Identify property that secures the debt		incl	es paym ude tax nsuranc	es		
					No	0.		
	-NONE-				Yes		_	
				_	165		\$	
					No			
					Yes		\$	
					No			
					Yes	+	\$	
						7		
					0.00	Copy		• • •
33e	Total average monthly payment. Add lines	s 33a through 33d	\$		0.00	here=	:> \\$	0.00

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Anthony J. Lastovich 19-50848 Debtor 1 Case number (if known) 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Total cure amount Monthly cure amount $\div 60 = \$$ -NONE-Copy total 0.00 0.00 Total here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. ■ No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 2.00 ÷ 60 0.04 36. Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total Average monthly administrative expense here=> 0.04 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 4,136.33 expense allowances Copy line 32, All of the additional expense deductions 604.00 Copy line 37, All of the deductions for debt payment 0.04 4.740.37 4.740.37 Copy total here=> Total deductions.....

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Anthony J. Lastovich 19-50848 Debtor 1 Case number (if known) Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) 39. Copy your total current monthly income from line 14 of Form 122C-1. Chapter 13 50,000.00 Statement of Your Current Monthly Income and Calculation of Commitment Period. 40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably 0.00 necessary to be expended for such child. 41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as 1.602.00 specified in 11 U.S.C. § 362(b)(19). 42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here => 4,740.37 43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. Amount of expense Describe the special circumstances Сору 0.00 0.00 Total \$ here=> \$ Copy 44. **Total adjustments.** Add lines 40 through 43. 6.342.37 here=> -\$ 6.342.37 43.657.63 45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39. Part 3: Change in Income or Expenses 46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase. Form Line Reason for change Date of change Increase or Amount of change decrease? ☐ Increase 122C-1 5b monthly business expenses 40,000.00 Decrease ■ 122C-2 ☐ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease ☐ 122C-1 ☐ Increase ■ 122C-2 □ Decrease ☐ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease

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Debtor 1 Anthony J. Lastovich Case number (if known) 19-50848

Part 4:	rt 4: Sign Below	
	By signing here, under penalty of perjury you declare that the information	n on this statement and in any attachments is true and correct.
X	X /s/ Anthony J. Lastovich Anthony J. Lastovich Signature of Debtor 1	
Date	Date November 5, 2019 MM / DD / YYYY	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation
	\$245	filing fee
	\$75	administrative fee
	+ \$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-50848 Doc 6 Filed 11/05/19 Entered 11/05/19 13:45:17 Desc Main Document Page 61 of 61

United States Bankruptcy Court District of Minnesota

In re	Anthony J. Lastovich		Case No.	19-50848	
		Debtor(s)	Chapter	13	

VERIFICATION OF CREDITOR MATRIX							
The above-named Debtor hereby verifies	that the attached list of creditors is true and correct to the best of his/her knowledge.						
Date: November 5, 2019	/s/ Anthony J. Lastovich Anthony J. Lastovich Signature of Debtor						